



DISEASE WATCH | IN THE NEWS



Image courtesy of CDC/ Erskine Palmer, Russell Regnery.

Marburg outbreak in Angola

The ongoing outbreak of Marburg haemorrhagic fever in Angola is the largest outbreak of this filovirus infection since the 1998–2000 outbreak in the Democratic Republic of Congo. The case fatality rate so far has exceeded 90%, with the majority of the cases occurring in the Uige province in the north of the country. Over 200 deaths from the disease have been reported to date, with many of the victims children under the age of 5; the source of the initial infection remains to be identified. An outbreak of Marburg can be contained relatively easily by classical public health interventions to break chains of transmission, but the response to the crisis from international agencies such as the WHO has been periodically hampered by a hostile response from local people. Meanwhile, WHO and CDC staff have issued statements requesting that emerging infections such as Marburg should not distract attention from more ‘routine’ diseases such as cholera and malaria. **WHO**

Pandemic flu strain causes panic

Staff at a local virology laboratory in Canada raised the alarm at the end of March when they identified a pandemic H2N2 influenza A strain in a proficiency testing kit. The kits had been compiled by Meridian Bioscience on behalf of the College of American Pathologists and investigation revealed that they had been distributed to some 6,000 laboratories in 19 countries worldwide. The H2N2 strain was the cause of the 1957 Asian pandemic and

circulated in humans between 1957 and 1968; individuals born after 1968 will therefore have no natural immunity to the strain. The WHO issued an immediate alert ordering the destruction of the kits, and it is believed that they have now all been destroyed. No infections of laboratory workers have been reported. Klaus Stohr, Director of the WHO's Influenza Programme, commented that the inclusion of the H2N2 strain in the kits had been ‘unwise’. **WHO**

Africa Malaria Day

The 5th annual Africa Malaria Day on 25 April marked the half-way point for the targets set in the 2000 Abuja declaration, which was signed by 44 Heads of State or national representatives and set targets for malaria eradication by 2010. The theme for this year’s Africa Malaria Day was ‘unite against malaria’, with official events in Africa taking place in Lusaka, the capital of Zambia. A coordinated programme to distribute insecticide-impregnated nets in Zambia has led to a reduction in the incidence of malaria. In addition, the World Bank announced new funding of up to one billion US dollars over the next five years for malaria prevention. **UNICEF**

Infection link to childhood leukaemia

A report from the United Kingdom Childhood Cancer Survey (UKCSS) published in the *British Medical Journal* in April concludes that reduced exposure to infection in the first few months of life is associated with an increased risk of developing leukaemia. The paper presents the results of a case-controlled study that compared 3,838 children who had been diagnosed with cancer with 7,629 healthy youngsters across 10 regions of the UK. Children who regularly attended group day-care twice a week during the first few months of life were half as likely to develop leukaemia compared with children with no significant social contact outside the home, leading researchers to conclude that exposure to common pathogens has a protective effect.

BMJ

Chagas disease

Chagas disease is caused by the protozoan parasite *Trypanosoma cruzi*. According to recent WHO estimates, 16–18 million people are infected with *T. cruzi*, and ~120 million are at risk of infection, mainly in Latin America. A recent outbreak of the disease in the Santa Catarina region of Brazil caused by contaminated sugar-cane juice, in which

3 people died and 22 individuals were diagnosed with the disease, has served to highlight this neglected disease and has led to calls from Brazilian researchers for increased funding. At present there is no effective treatment for the disease; however, at the beginning of April, researchers reported promising results in mice with an antifungal agent, TAK-187. **ABC News**

Spotlight on MRSA

A common UK clone of community-acquired methicillin-resistant *Staphylococcus aureus* (MRSA) evolved from the phage type 80/81 penicillin-resistant *S. aureus* strain that caused a pandemic in the 1950s, according to a study published in the *Lancet*. These results, obtained using multilocus sequence analysis, suggest that community-acquired MRSA may spread faster and be more widespread than was previously thought. MRSA has also been in the headlines in the UK as a key issue for all political parties before the General Election at the beginning of May, with attention focused on the best method to combat nosocomial MRSA infections. **Lancet; BBC**

vCJD

More than 10 individuals in France have now been diagnosed with variant Creutzfeldt–Jakob disease (vCJD). Four French nationals have been diagnosed with the disease in less than six months, two of whom were blood donors. At present, the first recognized case of vCJD is a case identified in the UK in 1995; however, it has been announced that French researchers are re-analysing the brain of a woman who died in 1971 for possible vCJD. If confirmed, this would indicate a much earlier origin for the disease, and possibly also a different country of origin. In addition, a campaign has been launched to prevent NIH destroying a collection of human brains from patients afflicted with conditions similar to vCJD. **AIP**

Outbreak news

Polio. An outbreak of polio has been reported in south-west Yemen, the first wild polio cases to be reported in the country since 1996. Additionally, polio cases have now also been reported in Indonesia.

Cholera. An ongoing outbreak of cholera in Senegal continues to give cause for concern. A large number of cases were reported in the city of Touba, owing to the large influx of people for the ‘le Magal de Touba’ pilgrimage.